Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

(Chapter 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
=	+ \$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill	In this information to identify your case:		
Del	btor 1 Latosha Graham		
Dal	First Name Middle Name Last Name btor 2		
	ouse if, filing) First Name Middle Name Last Name		
Uni	ited States Bankruptcy Court for the: DISTRICT OF NEVADA		
Ca	se number 17-14532		
	nown)	_	k if this is an
		amer	ided filing
<u></u>	#:-:-! F 4000		
	fficial Form 106Sum		
	Immary of Your Assets and Liabilities and Certain Statistical Information as complete and accurate as possible. If two married people are filing together, both are equally responsible.		12/15
info	ormation. Fill out all of your schedules first; then complete the information on this form. If you are filing ame		
	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Pai	rt 1: Summarize Your Assets		
		Your a	ssets of what you own
,	Calcadula A/Da Bran antu (Official Form 400A/D)	value	or what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,469.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	17,469.00
Pai	rt 2: Summarize Your Liabilities		
ı a	Cumillariae i sur alusinide	Varia	
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$	17,960.00
_	2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	Ψ	
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	46,442.00
	Your total liabilit	ina (t	04 400 00
	Your total liability	es 5	64,402.00
Pai	rt 3: Summarize Your Income and Expenses	-	
	<u>'</u>		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	. \$	3,199.78
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,076.00
Pai	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
٠.	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with	your other so	hedules.
	■ Yes		
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	for a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Latosha Graham Case number (if known) 17-14532

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
Trom rait 4 on ocheane 2/1, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	29,905.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	29,905.00

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	Case 17-14552-bit	DOC 11 LINETEG 03/21/17 15.0	75.42 Tage To	1 40
Fill in this infor	rmation to identify your case a	nd this filing:		
Debtor 1	Latosha Graham			
		Middle Name Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Last Name		
United States B	ankruptcy Court for the: DISTF	RICT OF NEVADA		
0	47.44500			
Case number	17-14532			☐ Check if this is an amended filing
				-
Official Fo	orm 106A/B			
	le A/B: Property	1		12/15
		List an asset only once. If an asset fits in more than on	e category, list the asset i	
	re space is needed, attach a separ	essible. If two married people are filing together, both ar ate sheet to this form. On the top of any additional page		
Part 1: Describe	e Each Residence, Building, Land,	or Other Real Estate You Own or Have an Interest In		
1. Do you own or	have any legal or equitable interes	at in any residence, building, land, or similar property?		
■ No. Go to Pa	art 2.			
☐ Yes. Where	is the property?			
Part 2: Describe	e Your Vehicles			
	rucks, tractors, sport utility ve	report it on Schedule G: Executory Contracts and Ur	nexpired Leases.	
3.1 Make:	Ford	Who has an interest in the property? Check one		claims or exemptions. Put
Model:	Edge	Debtor 1 only		red claims on Schedule D: aims Secured by Property.
Year:	2013	Debtor 2 only	Current value of the	Current value of the
Approxima Other info	ate mileage: 60,000 rmation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	materi.	At least title debitors and another	* 44.074.00	****
		☐ Check if this is community property (see instructions)	\$14,074.00	\$14,074.00
Examples: Box ■ No □ Yes 5 Add the doll pages you h Part 3: Describe	ats, trailers, motors, personal wa lar value of the portion you ow lave attached for Part 2. Write to e Your Personal and Household Ite	that number hereems	r entries for	\$14,074.00 Current value of the portion you own?
6 Household a	poods and furnishings			Do not deduct secured claims or exemptions.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

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De	btor 1	Latosha Gra	aham	Case number (if known)	17-14532
	Yes.	Describe			
			Appliances		\$20.00
			Furniture		\$1,500.00
	□No	les: Televisions a	and radios; audio, video, stereo, and digital equipmo I phones, cameras, media players, games	ent; computers, printers, scanners; music c	ollections; electronic devices
			Computer		\$150.00
	Exampl		I figurines; paintings, prints, or other artwork; books ions, memorabilia, collectibles	, pictures, or other art objects; stamp, coin,	, or baseball card collections;
	Exampl ■ No	ent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bic	ycles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
	■ No		s, shotguns, ammunition, and related equipment		
	□ No ·		othes, furs, leather coats, designer wear, shoes, ac	ccessories	
			Clothing, Shoes, Coats		\$200.00
	■ No		ewelry, costume jewelry, engagement rings, weddin	g rings, heirloom jewelry, watches, gems, ς	gold, silver
	Exam _l ■ No	arm animals ples: Dogs, cats, Describe	birds, horses		
	■ No	ther personal ar	nd household items you did not already list, incl	uding any health aids you did not list	
15			of all of your entries from Part 3, including any number here		\$1,870.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured

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D	ebtor 1	Latosha G	raham			Case number (if known)	17-14532
							claims or exemptions.
16.	□ No			, ,	ome, in a safe deposit box, and on	hand when you file your petition	on
						Cash	\$0.00
17.		•	•		ounts; certificates of deposit; share s with the same institution, list each		nouses, and other similar
	_				Institution name:		
			17.1.	Checking	Silver State Schools C	Credit Union	\$1,500.00
			17.2.	Savings	Silver State Schools C	redit Union	\$25.00
18.					okerage firms, money market acco	ounts	
	☐ Yes			Institution or issuer	name:		
19.	joint ve		stock and	interests in incorp	orated and unincorporated busi	nesses, including an interes	t in an LLC, partnership, and
	■ No □ Yes.	Give specific i		about them me of entity:		% of ownership:	
20.	Negotia	able instrumer	ts include p	personal checks, car	otiable and non-negotiable instrusions shiers' checks, promissory notes, a ansfer to someone by signing or de	and money orders.	
		Give specific i		about them uer name:			
21.		nent or pension bles: Interests i			403(b), thrift savings accounts, or c	other pension or profit-sharing	plans
		List each acco		tely. of account:	Institution name:		
22.	Your sh Examp		sed deposi	ts you have made so	o that you may continue service or public utilities (electric, gas, water		nies, or others
	■ No □ Yes				Institution name or individu	ıal:	
23.	_	ies (A contract	for a perio	dic payment of mon	ey to you, either for life or for a nur	mber of years)	
	■ No □ Yes		Issuer nam	ne and description.			
24.				n an account in a q and 529(b)(1).	qualified ABLE program, or unde	r a qualified state tuition pro	ogram.
	■ No □ Yes		Institution r	name and descriptio	on. Separately file the records of an	y interests.11 U.S.C. § 521(c):	:
25.	Trusts,	equitable or	future inte	rests in property (c	other than anything listed in line	1), and rights or powers exe	ercisable for your benefit

De	ebtor 1	Latosha Graham		Ca	ise number (if known)	17-14532
	☐ Yes.	Give specific information about	them			
26.			le secrets, and other intellectua posites, proceeds from royalties an		;	
	■ No	·		0 0		
		Give specific information about				
27.		es, franchises, and other gene les: Building permits, exclusive	ral intangibles icenses, cooperative association	holdings, liquor license	s, professional license	98
	☐ Yes.	Give specific information about	them			
M	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
		unds owed to you				
	□ No	Cive apositic information about t	hem, including whether you alread	dy filod the returns and	the toy years	
	– 165.	Sive specific information about t	nem, including whether you alread	uy illed the returns and	trie tax years	
			2017 Tax Refund		Federal	Unknowr
_						
	Other a	Give specific information Imounts someone owes you Iles: Unpaid wages, disability ins benefits; unpaid loans you	urance payments, disability benel nade to someone else	iits, sick pay, vacation μ	oay, workers' comper	sation, Social Security
	■ No	bonomo, anpaia ibano you				
	☐ Yes.	Give specific information				
31.	Examp	ts in insurance policies les: Health, disability, or life insu	rance; health savings account (H	SA); credit, homeowne	r's, or renter's insuran	ce
	■ No □ Yes. I	Name the insurance company o	each policy and list its value.			
		Company		Beneficiary		Surrender or refund value:
32.	If you a		ou from someone who has died st, expect proceeds from a life inst		rrently entitled to rece	ive property because
	_	Give specific information				
33.			or not you have filed a lawsuit outes, insurance claims, or rights t		r payment	
	☐ Yes.	Describe each claim				
34.	_	ontingent and unliquidated cl	aims of every nature, including	counterclaims of the	debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim				
35.	_ `	ancial assets you did not alre	ady list			
	■ No □ Yes.	Give specific information				

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Debtor 1	Latosha Graham		Case number (if known)	17-14532
	d the dollar value of all of your entries from Part 4, including Part 4. Write that number here			\$1,525.00
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	st In. List any real esta	ate in Part 1.	
37. Do yo	u own or have any legal or equitable interest in any business-relate	d property?		
No.	Go to Part 6.			
☐ Yes.	. Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You of you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do y	ou own or have any legal or equitable interest in any farm-	or commercial fishin	ng-related property?	
■ N	lo. Go to Part 7.			
ΠY	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Exal ■ No	ou have other property of any kind you did not already list? mples: Season tickets, country club membership s. Give specific information			
54. Ad	d the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Par	t 1: Total real estate, line 2			\$0.00
56. Par	t 2: Total vehicles, line 5	\$14,074.00		
57. Par	t 3: Total personal and household items, line 15	\$1,870.00		
58. Par	t 4: Total financial assets, line 36	\$1,525.00		
59. Par	t 5: Total business-related property, line 45	\$0.00		
	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Par	rt 7: Total other property not listed, line 54 +	\$0.00		
62. Tot	al personal property. Add lines 56 through 61	\$17,469.00	Copy personal property to	otal \$17,469.0 0
63. Tot	al of all property on Schedule A/B. Add line 55 + line 62			\$17.469.00

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Latosha Graham			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number	17-14532			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/E	that you claim as exe	empt,	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	2013 Ford Edge 60,000 miles Line from Schedule A/B: 3.1	\$14,074.00		\$0.00	11 U.S.C. § 522(d)(2)		
	Line Ironi Scriedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit			
	Appliances Line from Schedule A/B: 6.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(3)		
	Line Holli Golleddie 74 b. 4.1			100% of fair market value, up to any applicable statutory limit			
	Furniture Line from Schedule A/B: 6.2	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)		
	Line Holli Schedule Arb. 0.2			100% of fair market value, up to any applicable statutory limit			
	Computer Line from Schedule A/B: 7.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)		
	Line IIoiii Scredule Arb. 1.1			100% of fair market value, up to any applicable statutory limit			
	Clothing, Shoes, Coats Line from Schedule A/B: 11.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)		
	Line Ironi Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit			

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De	ebtor 1 Latosha Graha	m			Case number (if known)	17-14532	
		ief description of the property and line on chedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Checking: Silver Sta	te Schools	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B:	17.1			100% of fair market value, up to any applicable statutory limit		
	Savings: Silver State	e Schools Credit	\$25.00		\$25.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B:	17.2			100% of fair market value, up to any applicable statutory limit		
	Federal: 2017 Tax Re		Unknown		\$10,000.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule AVD.	ille IIOIII <i>Scriedule PVD</i> . 20.1			100% of fair market value, up to any applicable statutory limit		
3.	■ No	n 4/01/19 and every 3	3 years after that for ca	ases fi	led on or after the date of adjustmer	,	
	□ No	,	,		•		
	☐ Yes						

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Fill in this informatio	n to identify you	ır case:			
	atosha Grahar				
	rst Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing) Fin	rst Name	Middle Name Last Name		-	
United States Bankrup	otcy Court for the	DISTRICT OF NEVADA			
Case number (if known)	4532				if this is an
Official Form 10	06D				Ü
		Who Have Claims Secured	by Propert	y	12/15
		If two married people are filing together, both are eq out, number the entries, and attach it to this form. On			
1. Do any creditors have	claims secured b	y your property?			
☐ No. Check this	box and submit t	his form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all o	of the information	below.			
Part 1: List All Sec	cured Claims				
for each claim. If more th	nan one creditor has	more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 AmeriCredit/G	M	Describe the property that secures the claim:	\$17,960.00	\$14,074.00	\$3,886.00
Creditor's Name		2013 Ford Edge 60,000 miles			
Po Box 18385	-	As of the date you file, the claim is: Check all that apply.			
Arlington, TX		Contingent			
Number, Street, City, S	State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the del		☐ Judgment lien from a lawsuit			
☐ Check if this claim re community debt		Other (including a right to offset)			
Date debt was incurred	Opened 03/17 Last Active 7/26/17	Last 4 digits of account number			
Add the dollar value of	of vour entries in C	column A on this page. Write that number here:	\$17,96	00.00	
If this is the last page	of your form, add	the dollar value totals from all pages.	\$17,96		
Write that number her	re:	· -	\$17,9C	0.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Case 17-1453	2-bib Di	OC II EILE	ereu 09/21/17 15.09.	42 Page 15 0	1 40
Fill	in this info	ormation to identify your	case:				
Deb	otor 1	Latosha Graham					
		First Name	Middle Na	ame	Last Name		
	otor 2						
(Spo	use if, filing)	First Name	Middle Na	ame	Last Name		
Unit	ted States E	Bankruptcy Court for the:	DISTRICT	OF NEVADA			
Cas	se number	17-14532					
(if kn	own)			_			Check if this is an
							amended filing
Off	icial Fo	rm 106E/F					
		E/F: Creditors W	/ho Have	Unsecured	l Claims		12/15
					TY claims and Part 2 for creditor	s with NONPRIORITY cla	
Sche left. / name	dule D: Cred Attach the C and case n	ditors Who Have Claims Sec ontinuation Page to this pag number (if known).	ured by Proper ge. If you have r	ty. If more space is no information to re	Do not include any creditors with needed, copy the Part you need eport in a Part, do not file that Pa	, fill it out, number the e	ntries in the boxes on the
		All of Your PRIORITY Un					
1.	_ ′	litors have priority unsecure	d claims agains	st you?			
	No. Go to	Part 2.					
_	Yes.	All of Vous NONDDIODIT	V II	Claima			
		All of Your NONPRIORIT					
		litors have nonpriority unsec	_	. •			
	☐ No. You I	have nothing to report in this p	art. Submit this f	form to the court with	h your other schedules.		
	Yes.						
	unsecured cl	aim, list the creditor separately	y for each claim.	For each claim liste	the creditor who holds each clain and, identify what type of claim it is. It have more than three nonpriority to	o not list claims already in	cluded in Part 1. If more
							Total claim
4.1	Aaron	Sales & Lease Ow		Last 4 digits of ac	count number		Unknown
		rity Creditor's Name		When was the deb	ot incurred?	_	
		Cobb Place Blvd Nw esaw, GA 30144		Wileli was the det			_
	Number	Street City State Zlp Code		As of the date you	I file, the claim is: Check all that a	pply	
	Who in	curred the debt? Check one.					
	■ Deb	tor 1 only		☐ Contingent			
	☐ Debt	tor 2 only		☐ Unliquidated			
	☐ Debt	tor 1 and Debtor 2 only		☐ Disputed			
	☐ At le	ast one of the debtors and and	other		RITY unsecured claim:		
		ck if this claim is for a com	munity	☐ Student loans			
	debt Is the c	laim subject to offset?		Obligations aris	ing out of a separation agreement or	or divorce that you did not	
	■ No				on or profit-sharing plans, and other	similar debts	
	☐ Yes			Other. Specify	Furniture		
				G p 00my			_

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Debtor	Latosha Graham		Case number (if know)	17-14532	
4.2	Aaron's Inc. Nonpriority Creditor's Name	Last 4 digits of account number			Unknown
	400 Galleria Pkwy. SE Ste. 300	When was the debt incurred?			
	Atlanta, GA 30339-3182 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset? —	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Furniture			
4.3	Ad Astra Recovery Nonpriority Creditor's Name	Last 4 digits of account number	6784		\$187.00
	7330 W 33rd St Ste 118 Wichita, KS 67205	When was the debt incurred?	Opened 03/17		
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharin	• •		
	Yes	Other. Specify Collection	Attorney Rapid Cash	103	
4.4	Central Credit Services Nonpriority Creditor's Name	Last 4 digits of account number	0125		\$347.00
	9550 Regency Square Blvd Ste 500 Jacksonville, FL 32225	When was the debt incurred?	Opened 12/13/16		
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed	d alaim.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	ı cialili.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar de	ebts	
	☐ Yes	■ Other. Specify 01 Cox Cor			
		. ,			

Debto	Latosha Graham		Case number (if know) 17-14532	
4.5	Comenity Capital/mprc Nonpriority Creditor's Name	Last 4 digits of account number	2792	\$1,361.00
	Attn: Bankruptcy Po Box 18215 Columbus, OH 43218	When was the debt incurred?	Opened 06/17 Last Active 7/24/17	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify Charge Acc	count	
4.6	Credit Acceptance Nonpriority Creditor's Name	Last 4 digits of account number	7448	\$0.00
	25505 West 12 Mile Rd Suite 3000	When was the debt incurred?	Opened 09/13 Last Active 8/26/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile)	
4.7	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	4202	\$0.00
	Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 2/21/10 Last Active 6/26/12	
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Labelia	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	□ Yes	Other, Specify Credit Card		
	□ 162	Other, Specify Credit Card		

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Debto	Latosha Graham		Case number (if know) 17-14532	
4.8	Debt Recovery Solution Nonpriority Creditor's Name	Last 4 digits of account number	1256	\$337.00
	Attention: Bankruptcy 6800 Jericho Turnpike Ste 113e Syosset, NY 11791	When was the debt incurred?	Opened 1/29/14	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Verizon	
4.9	Dept Of Ed/582/neInet Nonpriority Creditor's Name	Last 4 digits of account number	1465	\$18,679.00
	Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 04/12 Last Active 9/17/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa	I	
4.1	Dept Of Ed/582/nelnet	Last 4 digits of account number	1365	\$11,226.00
	Nonpriority Creditor's Name Attn: Claims/Bankruptcy Po Box 82505	When was the debt incurred?	Opened 04/12 Last Active 9/17/14	
	Lincoln, NE 68501 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	I	

1 Latosha Graham	Case number (if know) 17-14532	
Designed Receivable Solutions, Inc. /DRS	Last 4 digits of account number 6581	\$93.00
Nonpriority Creditor's Name 1 Centerpointe Drive, Suite 450 La Palma, CA 90623	When was the debt incurred? Opened 04/12	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection Attorney Hudson Valley Emergency Medici	
DirecTV	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name Attn: Bankruptcy Claims PO Box 6550	When was the debt incurred?	
Englewood, CO 80155		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset? —	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Cable TV	
EOS-CCA	Last 4 digits of account number 8590	\$523.00
Nonpriority Creditor's Name 700 Longwater Dr. Norwell, MA 02061	When was the debt incurred? Opened 06/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection Attorney Time Warner Cable	
	— Other, Specify	

Debto	Latosha Graham		Case number (if know) 17-14532	
4.1	ERC/Enhanced Recovery Corp	Last 4 digits of account number	9323	\$305.00
	Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Rd	When was the debt incurred?	Opened 08/14	
	Jacksonville, FL 32256 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Sprint	
4.1 5	ESL Federal Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	5506	\$0.00
	Attn: Bankruptcy Dept 225 Chestnut St	When was the debt incurred?	Opened 07/15 Last Active 2/10/16	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	Student loans	. ordini.	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of avoice that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.1 6	ESL Federal Credit Union	Last 4 digits of account number	0544	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 225 Chestnut St	When was the debt incurred?	Opened 05/16 Last Active 10/31/16	
	Rochester, NY 14604 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Unsecured		

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Debt	or 1 Latosha Graham		Case number (if know)	17-14532	
4.1	Frontier Communication	Last 4 digits of account number	6156		\$365.00
	Nonpriority Creditor's Name 19 John St Middletown, NY 10940	When was the debt incurred?	Opened 10/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	ration agreement or divorce		
	Yes	Other Specify Agriculture	•		
4.1	Jefferson Capital Systems, LLC	Last 4 digits of account number	6003		\$1,095.00
	Nonpriority Creditor's Name 16 Mcleland Rd Saint Cloud, MN 56303 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	Opened 04/16		
	Who incurred the debt? Check one.	As of the date you me, the claim	3. Officer all trial apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing			
	Yes	■ Other. Specify Wireless	Company Account Ve	erizon	
4.1 9	LVNV Funding/Resurgent Capital Nonpriority Creditor's Name	Last 4 digits of account number	4202		\$687.00
	Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 3/11/13		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	□ Debtor 2 only□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	☐ Yes	■ Other, Specify 12 Credit C	ne Bank N A		

Debte	or 1 Latosha Graham		Case number (if know) 17-14532			
4.2	Monroe County	Last 4 digits of account number		Unknown		
0	Nonpriority Creditor's Name Department of Social Services 111 Westfall Rd.	When was the debt incurred?				
	Rochester, NY 14620 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Unsecured				
4.2 1	MRS BPO	Last 4 digits of account number	9827	\$234.00		
	Nonpriority Creditor's Name 1930 Olney Ave Cherry Hill, NJ 08003	When was the debt incurred?	Opened 12/16			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharin	a plans, and other similar debts			
	Yes	' '	Attorney Time Warner Cable			
	☐ Yes	Other. Specify Conection	Attorney Time Warner Cable			
4.2 2	Navient Nonpriority Creditor's Name	Last 4 digits of account number	1017	\$0.00		
	Attn: Bankruptcy Po Box 9500 Wilkes-Barr, PA 18873	When was the debt incurred?	Opened 10/08 Last Active 4/18/12			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	☐ Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	\square At least one of the debtors and another					
	☐ Check if this claim is for a community debt	\square Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify				

Official Form 106 E/F

Educational

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Debt	or 1 Latosha Graham		Case number (if know) 17-14532	
4.2 3	Navient	Last 4 digits of account number	1005	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500 Wilkes-Barr, PA 18873	When was the debt incurred?	Opened 10/04 Last Active 4/18/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educationa		
4.2 4	Navient	Last 4 digits of account number	1217	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500	When was the debt incurred?	Opened 12/04 Last Active 4/18/12	
	Wilkes-Barr, PA 18873			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	I	
4.2 5	Navient	Last 4 digits of account number	1208	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500 Wilkes-Barr, PA 18873	When was the debt incurred?	Opened 12/08 Last Active 4/18/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No	<u> </u>	y pians, and other similar debts	
	Yes	Other. Specify		
		Educationa	I	

Debt	or 1 Latosha Graham		Case number (if know) 17-14532					
4.2 6	Navient Solutions Inc	Last 4 digits of account number	1208	Unknown				
	Nonpriority Creditor's Name 11100 Usa Pkwy Fishers, IN 46037	When was the debt incurred?	Opened 12/08 Last Active 09/09					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	Debtor 1 only	Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	☐ Other. Specify						
		Educationa						
4.2								
7	Navient Solutions Inc	Last 4 digits of account number		Unknown				
	Nonpriority Creditor's Name 11100 Usa Pkwy Fishers, IN 46037	When was the debt incurred?	Opened 10/08 Last Active 09/09					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other. Specify						
		Educationa	ıl					
4.2 8	Navient Solutions Inc Nonpriority Creditor's Name	Last 4 digits of account number	0928	\$0.00				
	11100 Usa Pkwy Fishers, IN 46037	When was the debt incurred?	Opened 09/05 Last Active 5/04/12					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	■ Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharing	g plans, and other similar debts					
	□ Yes	Other Specify						

Official Form 106 E/F

Educational

Debtor	1 Latosha Graham		Case number (if know) 17-14	532
4.2	Sentry Recovery & Coll	Last 4 digits of account number	5001	\$6,516.00
9	Nonpriority Creditor's Name 3080 S Durango Dr. Suite 203	When was the debt incurred?	Opened 12/15/16	Ψο,ο10.00
	Las Vegas, NV 89117			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Пол		
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	☐ Student loans	Claim.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you di	d not
	No	Debts to pension or profit-sharin	n plane, and other similar debts	
		, ,		
	Yes	Other. Specify 09 Cheyenr	le Trails New	
4.3 0	Silver State Schools C	Last 4 digits of account number	0800	\$1,370.00
	Nonpriority Creditor's Name		Opened 08/16 Last Active	
	4221 S Mcleod Dr Las Vegas, NV 89121	When was the debt incurred?	7/08/17	
•	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you di	d not
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Unsecured		
4.3	Solomon & Solomon P C		6513	\$618.00
1	Nonpriority Creditor's Name	Last 4 digits of account number		
	5 Columbia Circle Albany, NY 12203	When was the debt incurred?	Opened 03/17	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you di	d not
	No	Debts to pension or profit-sharin		
	— NO		Attorney Rochester Gas And	
	☐ Yes	Other. Specify Electric Co		

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Depto	Latosna Granam	Case number (if know) 17-145	32
4.3	The Credit Bureau Inc	Last 4 digits of account number 6969	\$1,377.00
	Nonpriority Creditor's Name Eos Cca 700 Longwater Dr Norwell. MA 02061	When was the debt incurred? Opened 11/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Union Collection Attorney Esl Federal Credit Union	
4.3 3	The Credit Bureau Inc Nonpriority Creditor's Name	Last 4 digits of account number 1375	\$178.00
	Eos Cca 700 Longwater Dr	When was the debt incurred? Opened 08/16	
	Norwell, MA 02061 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Attorney Esl Federal Credit Union/Secur	
4.3 4	United Resource System Nonpriority Creditor's Name	Last 4 digits of account number 62N1	\$944.00
	3501 S Teller St Lakewood, CO 80235	When was the debt incurred? Opened 08/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Collection Attorney Northern Dutchess Other. Specify Paramedics	

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Debtor 1	Latosha (Graham		Case n	umber (if know)	17-14532	
3	US Dept of		Last 4 digits of account number	6261		-	\$0.00
	Attn: Bankr Po Box 164 Saint Paul,	uptcy 48	When was the debt incurred?	Open 6/28/	ned 4/16/12 13	Last Active	
	Number Street	City State ZIp Code	As of the date you file, the claim	is: Check	all that apply		
,	Who incurred t	the debt? Check one.	_				
	Debtor 1 onl	ly	Contingent				
	Debtor 2 onl	ly	Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
		is claim is for a community	Student loans				
	debt Is the claim su	bject to offset?	☐ Obligations arising out of a separeport as priority claims	aration ag	reement or divorc	e that you did not	
	■ No	•	☐ Debts to pension or profit-sharin	ng plans, a	and other similar	debts	
	☐ Yes		Other. Specify				
			Educationa	al			
10 1	US Dept of		Last 4 digits of account number	6161		_	\$0.00
	Nonpriority Cred Attn: Bankr Po Box 164 Saint Paul.	uptcy 48	When was the debt incurred?	Open 6/28/	ned 4/16/12 13	Last Active	
	Number Street	City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	all that apply		
	■ Debtor 1 onl	lv	☐ Contingent				
	Debtor 2 onl	lv	☐ Unliquidated				
	Debtor 1 and	•	☐ Disputed				
	_	of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
		is claim is for a community	Student loans				
	debt	•	☐ Obligations arising out of a sepa	aration ag	reement or divorc	e that you did not	
	Is the claim su	bject to offset?	report as priority claims				
	No		Debts to pension or profit-sharing	ng plans, a	and other similar	debts	
	☐ Yes		Other. Specify				
			Educationa	al			
Part 3:	List Others	s to Be Notified About a Debt T	hat You Already Listed				
is tryin have m notified	g to collect fro nore than one o d for any debts	you have others to be notified about myou for a debt you owe to some creditor for any of the debts that you in Parts 1 or 2, do not fill out or su	one else, list the original creditor in u listed in Parts 1 or 2, list the addi ubmit this page.	Parts 1	or 2, then list the	collection agency	here. Similarly, if you
Part 4:		mounts for Each Type of Unse					
	ne amounts of unsecured cla	certain types of unsecured claims. aim.	This information is for statistical re	eporting		-	the amounts for each
	6a.	Domestic support obligations		6a.	\$	al Claim 0.00	
	otal ims	Domestic Support Obligations		oa.	Ψ	0.00	
from Pa		Taxes and certain other debts yo	u owe the government	6b.	\$	0.00	
	6c.	Claims for death or personal inju	ry while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a through	n 6d.	6e.	\$	0.00	
						al Claim	
	6f.	Student loans		6f.	*	29,905.00	
cla from Pa	ims i rt 2 6g.	Obligations arising out of a sepa	ration agreement or divorce that	6g.	\$		

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Debtor 1	Latosha C	Graham	Case n	umber (if know)	17-14532	
		you did not report as priority claims			0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	16,537.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	46,442.00	

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Fill in this inform	mation to identify your	case:		
Debtor 1	Latosha Graham			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	DISTRICT OF NEVADA		
Case number	17-14532			
(if known)		-		☐ Check if thi amended fi

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	DirecTV Attn: Bankruptcy Claims PO Box 6550 Englewood, CO 80155	Satellite TV

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Fill in thi	s information to identify your	case:			
Debtor 1	Latosha Graham				
5 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	DISTRICT OF NEVADA			
Casa nur	obor 17 14522				
Case nur	nber <u>17-14532</u>			☐ Check if this is an amended filing	
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors		12/1	5
people ar fill it out, your nam 1. Do No Ye 2. Wi Arizo	e filing together, both are equent and number the entries in the e and case number (if known) by you have any codebtors? (If the code is a second of t	ally responsible for supplyin boxes on the left. Attach the . Answer every question. you are filing a joint case, do not lived in a community prope Nevada, New Mexico, Puerto	e Additional Page to the Additional Page to t	ry? (Community property states and territories include	ge,
	Yes.				
	In which community state	e or territory did you live?	-NONE-	. Fill in the name and current address of that persor	١.
in lin Form	e 2 again as a codebtor only i	ors. Do not include your spo f that person is a guarantor	or cosigner. Make	r if your spouse is filing with you. List the person she sure you have listed the creditor on Schedule D (Off 06G). Use Schedule D, Schedule E/F, or Schedule G t	icial
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	bt
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
3.2	Name Number Street			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line	
	City	State	ZIP Code		

Fill	in this information to identify you	r case:								
Del	btor 1 Latosha (Graham								
	btor 2 puse, if filing)									
Uni	ited States Bankruptcy Court for	the: DISTRICT OF NEVA	DA							
Cas	se number 17-14532					Check i	f this is:			
(If kr	nown)		-			☐ An a	amende	d filing		
									postpetition llowing date:	
0	fficial Form 106I					MM	I / DD/ Y	YYY		
S	chedule I: Your In	come								12/1
spo atta	plying correct information. If y use. If you are separated and y ch a separate sheet to this for Describe Employme	our spouse is not filing w m. On the top of any additi	ith you, do not includ	e infor	mati	on about y	our spo	use. If mo	re space is	needed,
1.	Fill in your employment information.		Debtor 1			C	Debtor 2	or non-fil	ing spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	yed		
	attach a separate page with information about additional	Employment status	□ Not employed				☐ Not er	mployed		
	employers.	Occupation	Teacher							
	Include part-time, seasonal, or self-employed work.	Employer's name	Clark County Sc	hool D	istri	ict				
	Occupation may include stude or homemaker, if it applies.	nt Employer's address	5100 West Sahar Las Vegas, NV 8		•					
		How long employed t	here? 1 Year				_			
Pai	rt 2: Give Details About N	Nonthly Income								
	mate monthly income as of the use unless you are separated.		you have nothing to re	port for	any	line, write \$	0 in the	space. Inc	lude your no	n-filing
	ou or your non-filing spouse have e space, attach a separate shee		ombine the information	for all e	empl	oyers for the	at perso	n on the lir	nes below. If	you need
						For Debto	or 1	For Deb	otor 2 or ng spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	3,5	58.00	\$	N/A	-
3.	Estimate and list monthly ov	ertime pay.		3.	+\$		0.00	+\$	N/A	

4. Calculate gross Income. Add line 2 + line 3.

\$

N/A

3,558.00

Debt	tor 1	Latosha Graham	_	С	ase	number (if kn	own)	17-1	4532		
					For	Debtor 1			r Debtor n-filing s		
	Сор	y line 4 here	4.		\$	3,558	.00	\$	ii-iiiiig s	N/A	_
5.	l ist	all payroll deductions:									_
Э.	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	7.4	.36	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$ —		.00	\$-		N/A N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$ —		.00	\$-		N/A N/A	_
	5d.	Required repayments of retirement fund loans	5d.		\$.00	\$ _		N/A N/A	_
	5e.	Insurance	5e.		_{\$} —	216		\$-		N/A	_
	5f.	Domestic support obligations	5f.		$\overset{\mathtt{v}}{\$}-$.00	\$-		N/A	_
	5g.	Union dues	5g.		\$ _		.26	\$_		N/A	_
	5h.	Other deductions. Specify:	5h.		$\dot{\$}^-$			+ \$-		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		* — \$	358		\$		N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* — \$	3,199		\$ \$		N/A	-
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$ \$.00	\$ \$		N/A	_
	8b.	Interest and dividends	8b.		· \$.00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$.00	\$_		N/A	_
	8d.	Unemployment compensation	8d.		\$.00	\$_		N/A	_
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e.		\$	U	.00	\$_		N/A	_
		Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_		.00	\$_		N/A	_
	8g.	Pension or retirement income	8g.		\$.00			N/A	_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$_	U	.00	+ >_		N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0	.00	\$_		N/A	<u>A</u>
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$;	3,199.78	+ \$		N/A	= \$	3.199.78
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ľ				.,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acity:	depe							<i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							e. 12.	\$Combi	
13.	Dον	ou expect an increase or decrease within the year after you file this form	?							monthl	y income
-		No.									
		Yes. Explain:									

Official Form 106I Schedule I: Your Income page 2

	n Alain in G	the section in the section				1		
51111	n this informa	tion to identify yo	our case:					
Debt	or 1	Latosha Gra	ham				if this is:	
Debt	or 2					_	An amended filing A supplement show	ving postpetition chapter
	use, if filing)							the following date:
Unite	ed States Bankr	uptcy Court for the	DISTRI	CT OF NEVADA		<u></u>	MM / DD / YYYY	
Case	e number 17	'-14 5 32						
(If kn	nown)							
Of	ficial Fo	rm 106J						
		J: Your I	Exner	1888				12/15
Be a info num	as complete a rmation. If m nber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta y questio	. If two married people a ch another sheet to this				or supplying correct
Part 1.	1: Descr	ibe Your House	hold					
١.	No. Go to							
			n a separ	ate household?				
	□ N		•					
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expense	s for Separate House	ehold of Debto	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		5	■ Yes
							_	□ No
					Daughter		7	■ Yes
								□ No □ Yes
								□ No
								☐ Yes
3.		enses include	han \blacksquare	No				
		f people other ti d your depende		Yes				
Darit	<u> </u>							
exp	mate your ex		our bankr	uptcy filing date unless				pter 13 case to report f the form and fill in the
Incl	ude expense	s paid for with r	non-cash	government assistance	if you know			
the	value of such	n assistance and		cluded it on Schedule I:			Your exp	enses
(On	icial Form 10	oi.)					Tour exp	
4.		r home owners d any rent for the		ses for your residence.	Include first mortgag	e 4. \$		590.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		17.00
				pkeep expenses		4c. \$		10.00
5.		owner's associat		dominium dues our residence, such as ho	ome equity loops	4d. \$ 5. \$		0.00
J.	Auditiolidi	nongaye payille	onto for yo	our residence, such as no	one equity loans	ა. ֆ		0.00

Debtor	Latosha Graham	Case number (if kno	own) 17-14532
6. Ut	ilities:		
6a	. Electricity, heat, natural gas	6a. \$	220.00
6b	. Water, sewer, garbage collection	6b. \$	0.00
6c	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	130.00
6d	. Other. Specify:	6d. \$	0.00
. Fo	od and housekeeping supplies	7. \$	700.00
	ildcare and children's education costs	8. \$	50.00
_	othing, laundry, and dry cleaning	9. \$	150.00
	rsonal care products and services	10. \$	75.00
	edical and dental expenses	11. \$	50.00
	•	п. ф	50.00
	ansportation. Include gas, maintenance, bus or train fare.	12. \$	250.00
	not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books	13. \$	200.00
	aritable contributions and religious donations	14. \$	
	<u> </u>	14. Ф	0.00
-	surance. In not include insurance deducted from your pay or included in lines 4 or 20.		
	a. Life insurance	15a. \$	0.00
_	b. Health insurance	15b. \$	
		15b. \$	0.00
	c. Vehicle insurance	· —	133.00
	d. Other insurance. Specify:	15d. \$	0.00
Sp	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16. \$	0.00
	stallment or lease payments:		
	a. Car payments for Vehicle 1	17a. \$	461.00
17	b. Car payments for Vehicle 2	17b. \$	0.00
17	c. Other. Specify:	17c. \$	0.00
17	d. Other. Specify:	17d. \$	0.00
8. Yo	ur payments of alimony, maintenance, and support that you did not report a	s	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		0.00
9. Ot	her payments you make to support others who do not live with you.	\$	0.00
	ecify:	19.	
	her real property expenses not included in lines 4 or 5 of this form or on Scl		me.
20	a. Mortgages on other property	20a. \$	0.00
20	b. Real estate taxes	20b. \$	0.00
20	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20	e. Homeowner's association or condominium dues	20e. \$	0.00
1. O t	her: Specify: Cigarettes	21. +\$	40.00
22. C a	Iculate your monthly expenses a. Add lines 4 through 21.	\$	3,076.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		3,070.00
	c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,076.00
	Iculate your monthly net income.	00 *	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,199.78
23	b. Copy your monthly expenses from line 22c above.	23b\$	3,076.00
23	c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	123.78
For	you expect an increase or decrease in your expenses within the year after yexample, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?		o increase or decrease because of a
	No.		
	Yes. Explain here:		

Fill in this info	rmation to identify your	case:			
Debtor 1	Latosha Graham				
Dalatan	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States F	Bankruptcy Court for the:	DISTRICT OF NEVADA			
ormod otatoo E	Summapley Countries and				
Case number	17-14532				
(if known)					if this is an led filing
Declara If two married You must file the obtaining money	people are filing togethe	n connection with a bankrup	ble for supplying correct in		
	gn Below pay or agree to pay some	eone who is NOT an attorney	<i>ı</i> to help you fill out bankrı	uptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Pr Declaration, and Signature (C	
	nalty of perjury, I declare are true and correct.	that I have read the summa	ry and schedules filed with	h this declaration and	
X /s/ La	tosha Graham		X		
Latos	sha Graham		Signature of Debto	or 2	
Signat	ture of Debtor 1				
Date	September 21, 2017		Date		

Del	otor 1	Latosha Grahan	 1			
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
				2451 144110		
Uni	ted States Bar	nkruptcy Court for the:	DISTRICT OF NEVADA			
	se number 1	7-14532				Check if this is an amended filing
	ficial For	-	Affairs for Indivic	duals Filing for B	ankruptcy	4/1
info	rmation. If m		ible. If two married people a attach a separate sheet to stion.			
Par	t 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	us?			
	☐ Married					
	■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. List	t all of the places you	lived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
	168 Indepe Rochester	endence St , NY 14611	From-To: April 2013 to June 2016	☐ Same as Debtor	l	☐ Same as Debtor 1 From-To:
3. state	■ No □ Yes. Ma	es include Árizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev hedule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
4.	Did you have Fill in the tota If you are filin No	e any income from er I amount of income yo	nployment or from operating ou received from all jobs and a have income that you receive	all businesses, including part	time activities.	endar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$33,572.25	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Latosha Graham Case number (if known) 17-14532 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$28,212.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$14,601.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. (before deductions each source Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... paid still owe

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7.	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners r more of their voting	erships of which y g securities; and a	ou are a genera any managing a	I partner; corporation gent, including one fo	
	No						
	Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	account of a de	ebt that benefited an	
	■ No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment	
Par	t 4: Identify Legal Actions, Repossession	s and Foreclosures	para	Still Owe	molade orea	ioi s riamo	
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number					or custody	
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.						
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the	
		Explain what happened	1			property	
	Sentry Recovery & Coll	Wages			5/17 &	\$1,531.00	
	3080 S Durango Dr. Suite 203 Las Vegas, NV 89117	☐ Property was repossessed.)/17		
		☐ Property was foreclosed.					
		■ Property was garnishe	ed.				
		☐ Property was attached	d, seized or levied.				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan solve to the solve to		luding a bank or fir	nancial institutio	n, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount	
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an ■ No □ Yes		erty in the possess			fit of creditors, a	

Debtor 1 Latosha Graham

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Clear Counsel Law Group 50 S. Stephanie St., Ste 101 Henderson, NV 89012 bankruptcy@clearcounsel.com	You Attorney Fees	or transfer was made 08/18/2017	Amount of payment \$500.00					
	Address Email or website address		or transfer was	Value Value Value Value of property lost perty to anyone you Amount of payment					
	Darson Who Was Daid	Description and value of any property	Date payment						
	Yes. Fill in the details.	5							
	No No								
6.	consulted about seeking bankruptcy or	uptcy, did you or anyone else acting on your behalf pay preparing a bankruptcy petition? preparers, or credit counseling agencies for services requires.		rty to anyone you					
Pai	rt 7: List Certain Payments or Transfe	rs							
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	loss	IOST					
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your						
	■ No □ Yes. Fill in the details.								
5.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?								
Pai	rt 6: List Certain Losses								
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Control of the Con	ŕ	Dates you contributed	Value					
	Yes. Fill in the details for each gift or								
4.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No								
	Person to Whom You Gave the Gift and Address:	d							
	Gifts with a total value of more than \$6 per person	00 Describe the gifts	Dates you gave the gifts	Value					
	Yes. Fill in the details for each gift.								
3.	Within 2 years before you filed for bank No	ruptcy, did you give any gifts with a total value of more	than \$600 per person?	•					
	rt 5: List Certain Gifts and Contributio	ns							
Pai									
Pai									

Debtor 1 Latosha Graham Case number (if known) 17-14532

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li No Yes. Fill in the details.	or to make payments			transfer any proper	ty to anyone who	
	Person Who Was Paid Address	Description and va	alue of any propo	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details. Person Who Received Transfer	siness or financial affaire as security (such as the	irs? ne granting of a se	Describe a	or mortgage on your		
	Address Person's relationship to you	property transferre	ed	payments i paid in exc	received or debts hange	made	
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote ■ No □ Yes. Fill in the details.		/ property to a so	elf-settled trus	st or similar device o	of which you are a	
	Name of trust	Description and va	alue of the prope	erty transferre	d	Date Transfer was made	
Par	List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Stor	age Units			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accoun	ts; certificates o			, ,	
		ast 4 digits of account number	Type of accoun instrument	clos	e account was sed, sold, ved, or sferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, St State and ZIP Code)		escribe the c	ontents	Do you still have it?	
22.	Have you stored property in a storage unit or ■ No	place other than your	home within 1 ye	ear before you	ı filed for bankruptc	y?	
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or he to it? Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?	

Debtor 1 Latosha Graham Case number (if known) 17-14532

Par	19: Identify Property You Hold or Control for S	Someone Else					
23.	Do you hold or control any property that someofor someone.	ne else owns? Include any prop	erty y	ou borrowed from, are storing for	r, or hold in trust		
	■ No						
	Yes. Fill in the details.	When to the common of O			Walana		
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value		
Par	t 10: Give Details About Environmental Informa	ition					
For	the purpose of Part 10, the following definitions a	apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal s	-	ıl law,	, whether you now own, operate,	or utilize it or used		
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		us wa	ste, hazardous substance, toxic s	substance,		
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wh	en the	ey occurred.			
24.	Has any governmental unit notified you that you	may be liable or potentially liab	le und	der or in violation of an environm	ental law?		
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?					
	No						
	Yes. Fill in the details.	On community of the		Fusing a montal law if you	Data of matica		
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	trative proceeding under any en	viron	mental law? Include settlements	and orders.		
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case		Status of the case		
Par	111: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have a	any of	f the following connections to any	y business?		
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity	y, eith	ner full-time or part-time			
	☐ A member of a limited liability company	(LLC) or limited liability partners	ship (L	LLP)			
	☐ A partner in a partnership		•				
	☐ An officer, director, or managing executi	ive of a corporation					
	☐ An owner of at least 5% of the voting or	•	n				

Official Form 107

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	■ No. None of the above applies. Go to F	Part 12.	
	☐ Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement to an	nyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Pari	12: Sign Below		
are t with		false statement, concealing property, or ol	declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both.
/s/ l	_atosha Graham		
	osha Graham nature of Debtor 1	Signature of Debtor 2	
Date	September 21, 2017	Date	
Did y	ou attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
■ N	0		
	es		
Did y	ou pay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy	forms?
■ N	0		
□ Y	es. Name of Person Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).

Debtor 1 Latosha Graham

Fill in this informati	ion to identify your o	ase:			
	Latosha Graham				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankru	uptcy Court for the:	DISTRICT OF NEV	/ADA		
Case number 17-	14532				
(if known)					☐ Check if this is an
					amended filing
O#: -: -! F	- 400				
Official Form			iduala Filina II.a		7
Statement	or intentio	n tor inaiv	iduals Filing Un	ider Chapter	12/15
If you are an individ	ual filing under chap	ter 7, you must fill	out this form if:		
creditors have cla	aims secured by you	ır property, or			
You must file this fo	is earlier, unless the	thin 30 days after y	t expired. rou file your bankruptcy petit time for cause. You must als		
	le are filing together late the form.	in a joint case, bot	h are equally responsible for	supplying correct infor	rmation. Both debtors must
	accurate as possibl		needed, attach a separate sh	neet to this form. On the	e top of any additional pages,
Part 1: List Your	Creditors Who Have	Secured Claims			
-	that you listed in Pa		Creditors Who Have Claims	Secured by Property (C	Official Form 106D), fill in the
	or and the property th	at is collateral	What do you intend to do w secures a debt?	ith the property that	Did you claim the property as exempt on Schedule C?
					ac onempt on concurs c
Creditor's Ame	eriCredit/GM Finan	cial	☐ Surrender the property.		□ No
name:			Retain the property and re		■ v
Description of 2	013 Ford Edge 60	,000 miles	☐ Retain the property and er Reaffirmation Agreement		■ Yes
property			Retain the property and [e		
securing debt:			Retain and make regula	ar payments	
Part 2: List Your					(2011)
in the information be	elow. Do not list real	estate leases. Une		t are still in effect; the le	Leases (Official Form 106G), fill ease period has not yet ended.
Describe your unex	cpired personal prop	erty leases		W	/ill the lease be assumed?
Lessor's name:	DirecTV				I No
				С] Yes
Description of leased Property:	Satellite TV				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Del	otor 1 L	atosha Graham	Case number (if known) 17-14532	_
Par	t 3: Si	gn Below		
	•	ry of perjury, I declare that I have indicate is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal	
X	/s/ Lat	osha Graham	X	
	Latosh	na Graham	Signature of Debtor 2	
	Signatu	re of Debtor 1		

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

	Dist	rict of Nevada		
In	e Latosha Graham		Case No.	17-14532
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSAT	TION OF ATTO	RNEY FOR DE	(RTOR(S)
				. ,
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in	e petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
				2,000.00
	Prior to the filing of this statement I have received			500.00
	Balance Due			1,500.00
<u>.</u>			······	
•	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
	■ I have not agreed to share the above-disclosed compensation	on with any other person	unless they are memb	pers and associates of my law firm
			•	·
	☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of			
i.	In return for the above-disclosed fee, I have agreed to render le	gal service for all aspec	ts of the bankruptcy c	ase, including:
	a. Analysis of the debtor's financial situation, and rendering ac			ile a petition in bankruptcy;
	b. Preparation and filing of any petition, schedules, statement c. Representation of the debtor at the meeting of creditors and			rings thereof;
	d. [Other provisions as needed]	_		_
	Debtor and Attorney have entered into two se the filing of a skeletal bankruptcy petition, the			
	agreement was for \$1,500, signed post-petitio	n, for the completion	n of the balance of	schedules and
	representation at the 341 meeting of creditors	. See in Re: Hines, 1	47 F.3d 1185 (9th C	Jir. 1998).
i.	By agreement with the debtor(s), the above-disclosed fee does in	not include the following	g service:	
	CEI	RTIFICATION		
	I certify that the foregoing is a complete statement of any agree	ment or arrangement fo	r payment to me for re	epresentation of the debtor(s) in
this	bankruptcy proceeding.	J		
	September 21, 2017	/s/ Matthew M. M	lcArthur	
_	Date	Matthew M. McA		
		Signature of Attorna Clear Counsel La		
		50 S. Stephanie		
		Henderson, NV 8		
		702-476-5900 Fa	ax: 702-924-0709	
		bankruptcy@cle	arcounsel.com	
		Name of law firm		

United States Bankruptcy Court District of Nevada

In re	Latosha Graham		ise No.	17-14532			
		Debtor(s) Ch	napter				
VERIFICATION OF CREDITOR MATRIX							
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.							
Date:	September 21, 2017	/s/ Latosha Graham					
		Latosha Graham					

Signature of Debtor